

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

FIDELITY NATIONAL FINANCIAL INC PAC 2001

ADDRESS (number and street) ▼

601 Riverside Ave

☐ Check if different than previously reported. (ACC)

Jacksonville

FL

32204

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00364455

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☒ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
07 01 2014

through

M M M / D D D / Y Y Y Y Y Y  
09 30 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Anthony J. Park

Signature of Treasurer

Anthony J. Park

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
10 07 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

FIDELITY NATIONAL FINANCIAL INC PAC 2001

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
07 / 01 / 2014 To: M M / D D / Y Y Y Y Y Y  
09 / 30 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2014</span>		<span style="border: 1px solid black; padding: 2px;">22845.65</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">11845.59</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">500.00</span>	<span style="border: 1px solid black; padding: 2px;">35000.00</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">12345.59</span>	<span style="border: 1px solid black; padding: 2px;">57845.65</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">8663.50</span>	<span style="border: 1px solid black; padding: 2px;">54163.56</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">3682.09</span>	<span style="border: 1px solid black; padding: 2px;">3682.09</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE

## of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

FIDELITY NATIONAL FINANCIAL INC PAC 2001

Report Covering the Period:

From:

 M M / D D / Y Y Y Y  
 07 / 01 / 2014

To:

 M M / D D / Y Y Y Y  
 09 / 30 / 2014
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

500.00

34250.00

(ii) Unitemized .....

0.00

750.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

500.00

35000.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

500.00

35000.00

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

500.00

35000.00

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

500.00

35000.00

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	163.50	672.13
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	163.50	672.13
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	45500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	3500.00	7991.43
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	8663.50	54163.56
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8663.50	54163.56

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	500.00	35000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	500.00	35000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	163.50	672.13
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	163.50	672.13

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 9

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**FIDELITY NATIONAL FINANCIAL INC PAC 2001**

Full Name (Last, First, Middle Initial)

## **A. Francene DePrez**

Mailing Address P.O. Box 652

City  
Jefferson

State  
TX

Zip Code  
75657

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Fidelity Residential Solutions

Occupation

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 25 / 2014

Transaction ID : SA11AI.5235

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

500.00

500.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 7 OF 9

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**FIDELITY NATIONAL FINANCIAL INC PAC 2001**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address P.O. Box 360001

City State Zip Code  
Ft. Lauderdale FL 33336Purpose of Disbursement  
merchant service fees

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 07 2014**Transaction ID : SB21B.5228**

Amount of Each Disbursement this Period

161.15

Full Name (Last, First, Middle Initial)

**B. Bank of America**Mailing Address 275 Valencia Avenue  
2nd FloorCity State Zip Code  
Brea CA 92823-6340Purpose of Disbursement  
bank fees

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 03 2014**Transaction ID : SB21B.5227**

Amount of Each Disbursement this Period

2.35

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ►

163.50

**TOTAL** This Period (last page this line number only)..... ►

163.50

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 OF 9

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**FIDELITY NATIONAL FINANCIAL INC PAC 2001**

Full Name (Last, First, Middle Initial)

**A. Gorell for Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2014

Mailing Address 1305 Del Norte Road  
Ste. 105

City Camarillo State CA Zip Code 93010

Purpose of Disbursement  
Campaign Contribution

011

Category/  
Type**Transaction ID : SB23.5226**

Amount of Each Disbursement this Period

5000.00

Candidate Name

**JEFF GORELL**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 26

**B.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Amount of Each Disbursement this Period

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**C.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Amount of Each Disbursement this Period

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

5000.00

**TOTAL** This Period (last page this line number only).....▶

5000.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 9

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**FIDELITY NATIONAL FINANCIAL INC PAC 2001**

Full Name (Last, First, Middle Initial)

**A. Kansans for Selzer**Mailing Address 7113 W. 135th. St.  
66223

City Overland Park State KS Zip Code 66223

Purpose of Disbursement  
Non-federal disbursement - Kansas Insurance Commissioner campaign

Candidate Name

**Ken Selzer**Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: KS District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		22		2014

**Transaction ID : SB29.5249**

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**B. Muriel Bowser for Mayor**

Mailing Address 515 Oglethorpe St. NE

City Washington State DC Zip Code 20011

Purpose of Disbursement  
Non-federal disbursement - Washington DC mayoral campaign

Candidate Name

**Muriel Bowser**Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: DC District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		14		2014

**Transaction ID : SB29.5247**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Texans for Joe Straus**

Mailing Address P.O Box 90388

City San Antonio State TX Zip Code 78209

Purpose of Disbursement  
Non-federal disbursement - TX State House of Representatives, District 121

Candidate Name

**Joe Straus**Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: TX District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2014

**Transaction ID : SB29.5250**

Amount of Each Disbursement this Period

2000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3500.00
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3500.00
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